

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	960296.98148
	First Name of Inventor	Kirk J. Hogan
	COMPLETE IF KNOWN	
	Application Number	09 / 908,410
	Filing Date	July 18, 2001
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ASSAY FOR PROPENSITY FOR CANINE MALIGNANT HYPERTHERMIA

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) July 18, 2001

as United States Application Number or PCT International

Application Number 09/908,410

and was amended on (MM/DD/YYYY) n/a

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
n/a			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

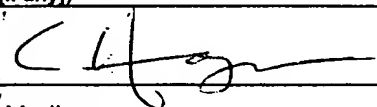
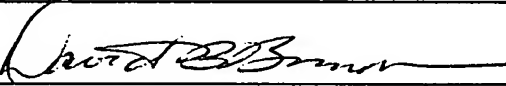
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DECLARATION — Utility or Design Patent Application

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Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
Kirk J.			Hogan		
Inventor's Signature 			Date 10/17/01		
Residence: City		State		Country	
Madison		WI		USA	
Mailing Address					
3417 Crestwood Drive					
Mailing Address					
City		State		Country	
Madison		WI		USA	
ZIP		53705			
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
David B.			Brunson		
Inventor's Signature 			Date 10/17/01		
Residence: City		State		Country	
Madison		WI		USA	
Mailing Address					
5010 Flad Avenue					
Mailing Address					
City		State		Country	
Madison		WI		USA	
ZIP		53711			
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

Please type a plus sign (+) inside this box ☐

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Monica C.		Roberts	
Inventor's Signature		Date	
Residence: City St. Paul	State MN	Country USA	Citizenship USA
Mailing Address			
Mailing Address			
City St. Paul	State MN	ZIP	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James R.		Mickelson	
Inventor's Signature		Date	
Residence: City St. Paul	State MN	Country USA	Citizenship USA
Mailing Address			
Mailing Address			
City St. Paul	State MN	ZIP	Country USA
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
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Inventor's Signature			Date		
Residence: City		Madison	State	WI	Country
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				USA	
Mailing Address 3417 Crestwood Drive					
Mailing Address					
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Mailing Address					
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				USA	
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Given Name (first and middle [if any])		Family Name or Surname	
Monica C.		Roberts	
Inventor's Signature <i>Monica C Roberts</i>		Date <i>10/03/01</i>	
Residence: City St. Paul	State MN	Country USA	Citizenship USA
Mailing Address			
Mailing Address			
City St. Paul	State MN	ZIP	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
James R.		Mickelson	
Inventor's Signature <i>James R Mickelson</i>		Date <i>10/3/01</i>	
Residence: City St. Paul	State MN	Country USA	Citizenship USA
Mailing Address			
Mailing Address			
City St. Paul	State MN	ZIP	Country USA
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Mailing Address			
City	State	ZIP	Country

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